

- All attachments to this protest must be filed in triplicate
- Read instructions on reverse side

County Name

NAME AND MAILING ADDRESS OF PERSON FILING PROTEST		Protest Number	Filed _____, 20____
Name		Protested Valuation 20____	Requested Valuation
Street or Other Mailing Address		Real Property	Real Property
City, Town, or Post Office	State	Zip Code	
Property Identification Number	Telephone Number ()	\$	\$
Real Property Description (Include Lot, Block, Addition, Location Address, Section, Township, Range, and County) and/or Personal Property Description		Reasons for requested valuation change (attach additional pages if needed):	

**sign
here**

Signature of Person Filing Protest

Date _____

Assessor's Recommendation	Referee's Recommendation (if Applicable)

Decision of County Board of Equalization for Assessment Year 20 ____

Basis for Action Taken (County Board of Equalization Chairperson)

Real Property

\$

Check One:

- ☐ If checked, the assessor has certified to the county board of equalization that a copy of that portion of the property record file which substantiates the calculation of the protested value is maintained in the assessor's office in electronic or paper form.
- ☐ Attached is a copy of that portion of the property record file which substantiates the calculation of the protested value.

Signature of County Board Chairperson

Date _____

County Clerk Certification

Date Protest was Heard	Date of Decision	Date Notice of Decision Mailed to Protestor
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The undersigned certifies that a copy of this protest and report of the action of the county board of equalization, which has been accepted by the assessor, has been mailed to the protestor at the above-shown address on _____, 20_____.

Signature of County Clerk

Date _____